

SOONERSELECT DENTAL – LIBERTY DENTAL PROVIDER TRAINING

3/5/2024, 3/7/2024 and 3/13/2024

 Providers were instructed that dental plans were going to mirror OHCA's current guidelines for coverage and prior authorizations (PAs). What is LIBERTY Dental doing to address discrepancies where LIBERTY Dental's processing guidelines and PA requirements are not in alignment with OHCA?

LIBERTY Dental has updated the benefits schedules posted on the provider portal and LIBERTY Dental website. Any claims and PAs impacted by the revised benefit schedules will be/have been reprocessed by LIBERTY Dental.

2. How can providers verify eligibility, view explanation of benefits (EOBs), or confirm payments without being logged into the LIBERTY Dental provider portal?

General SoonerCare and SoonerSelect eligibility and dental plan assignment may be verified on the OHCA provider portal in the managed care information fields. LIBERTY Dental will distribute EOBs to providers when payments are processed.

3. Where can a provider who is not yet in network locate a copy of LIBERTY Dental's benefits schedule?

Go to LIBERTY Dental's <u>website</u> and select the link for Provider Resources within the Provider Tools box (purple shaded area). A copy of the adult and child benefit schedules will be posted under the Oklahoma Provider Resources and Training subheading:

- OK-Medicaid-Adult-Benefit-Schedule.pdf
- OK-Medicaid-Child-Benefit-Schedule.pdf
- 4. How should a provider submit a PA request if they are not yet in network?



PA requests for out of network providers can be submitted electronically through a clearinghouse or submitted via email to oklahomaclaims@libertydentalplan.com.

5. Does LIBERTY Dental have a list of services that require a PA?

Yes, please refer to the benefit schedules posted to LIBERTY Dental's website. Direct links are available in the response to question 3 above.

6. How will providers know if a PA request is approved or denied if they are not yet in-network with LIBERTY Dental and do not have access to the LIBERTY Dental provider portal?

PA determination notices will be mailed to out-of-network providers.

- **7.** Can providers opt out of receiving PA determinations in the mail?

 Yes. Please contact your LIBERTY provider representative for assistance.
- 8. How are in-network providers notified of electronic funds transfer (EFT) payments?

EFT payment notifications are posted on the LIBERTY Dental provider portal.

9. Where can an in-network provider find a copy of LIBERTY Dental's Provider Reference Guide (PRG)?

The PRG can be found in the LIBERTY Dental provider portal and on LIBERTY Dental's <u>website</u> under Provider Reference Guide within the Provider Tools box (purple shaded area).

- Microsoft Word 2023-OK-Medicaid Provider Reference Guide 2023
- 10. Can a provider bill a member for a non-covered service, such as additional limited exams when the limitation has been met?

Providers should have members sign an informed consent form, available on the LIBERTY Dental website, before billing a member for a non-covered service. Additionally, it is recommended the provider first bill the dental plan for the service to receive confirmation that the service is either a non-covered benefit or the member has exhausted the benefits covered by the plan before billing the member.

• Informed Consent for Alternative Treatment Form English





- Informed Consent for Alternative Treatment Form Spanish
- 11. What is the process to submit a corrected claim or void a claim on the LIBERTY Dental provider portal?

Please file a new claim and explain the changes/rationale for resubmission in the remarks section.

12. What field is used on the LIBERTY Dental provider portal to indicate a third-party payment on a claim submission?

Please use the remarks section.

13. How are dental services performed in an inpatient and/or outpatient hospital or ambulatory surgery setting handled?

All services billed on an ADA claim form should be submitted to the member's dental plan. All services billed on a HCFA-1500 or UB-04 claim form should be submitted to the member's medical plan.

14. Do out-of-state providers still need to submit an out-of-state authorization for dental services before patients can be seen?

Yes, an out-of-state authorization must be completed for members who are being seen more than 100 miles from the Oklahoma border for dental services. Please refer to the 317:30-3-90 Out-of-State Services policy for additional information.

15. Do members have a \$4 copayment with LIBERTY Dental?

No, LIBERTY Dental has been approved to waive all copayments as a valueadded benefit.

- **16.** Are immediate denatures billed on the impression date or delivery date? Delivery date.
- 17. Are X-rays required for surgical extractions?

No, X-rays are not required at this time.





18. Does LIBERTY Dental cover nitrous oxide for adults?

LIBERTY Dental follows the same guidelines for coverage and reimbursement as OHCA. Please refer <u>to 317:30-5-696 Coverage by Category</u> for a complete description of covered benefits for children and adults.

19. How should providers handle members who have been dismissed from their practice but have chosen the provider as their dental home?

Please notify LIBERTY Dental plan of the members who need reassignment due to previous dismissals. LIBERTY Dental will reassign these members to a new dental home provider.





20. How do referrals work for LIBERTY Dental? Does a provider need to enter the specialist on the referral, or will LIBERTY Dental locate a specialist for the member?

Providers may enter the name of the specialist on the referral form, if known. If a provider needs assistance with locating a specialist, a referral can be submitted without specialist information, and LIBERTY Dental will assist with locating a specialist for the member.

21. Should providers be billing LIBERTY Dental the informational only canceled and/or missed appointment codes?

Providers are asked to bill the informational only canceled and/or missed appointment codes to LIBERTY Dental, as this helps to inform the case management team of possible engagement opportunities. Members may **not** be billed for canceled and/or missed appointments.

22. Does LIBERTY Dental require a general dentistry practitioner to submit a specialist referral for a member to be seen by a pediatric dentist?
No, a specialty referral is not required for members to be seen by pediatric dentists.

23. Are PAs currently waived during the 90-day continuity of care period LIBERTY Dental members?

LIBERTY Dental has chosen to extend the continuity of care period for LIBERTY Dental members from 90 to 120 days. During the continuity of care period, PAs for general dentists and specialty referrals have been waived. LIBERTY Dental specialists, including orthodontists, must continue to submit new PA requests to LIBERTY Dental for processing for dates of service on or after Feb. 1, 2024. LIBERTY Dental is also honoring all prior approved OHCA PAs.

